

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**  
**Mar 12, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A17334**

1. Entity Name  
**LDJ ASSOCIATES, LTD.**



Principal Place of Business

**C/O A. E. BROOKS  
11915 S.W. 82 RD.  
MIAMI, FL 33156**

Mailing Address

**C/O A. E. BROOKS  
11915 S.W. 82 RD.  
MIAMI, FL 33156**



03062007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2438431**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**BROOKS, LARRY E.  
8800 SW 116 ST.  
MIAMI, FL 33176**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Larry E. Brooks*  
Signature, typed or printed name of registered agent and title if applicable.

3/6/07  
DATE

**FILE NOW!! FEE IS \$500.00  
After May 1, 2007, Fee will be \$800.00**

**U00000665355  
03/23/07-80025-007 508.75**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**BROOKS, LARRY E.  
8800 S.W. 116 STREET  
MIAMI, FL 33176**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**BROOKS, DAVID L.  
520 FALCON AVE  
MIAMI SPRINGS, FL 33166**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**BROOKS, JAMES E.  
9520 OAK CREST DR.  
MANVEL, TX 77578**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Larry E. Brooks*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/6/07  
Date

Daytime Phone #

STAPLE CHECK HERE